


## A WORD FROM THE EXPERTS

# Raising Healthy Children

Interviews with Developers of Evidence-Based  
Programs for Teen Pregnancy Prevention





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*Inclusion on the HHS Teen Pregnancy Prevention Evidence Review does not indicate HHS or OAH endorsement of a program model.*



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## **Program goals :**

- Promote bonding to school and family
- Increase academic success
- Reduce mental, emotional and behavioral disorders

## **Target population:**

- Late Childhood (5-11)
- Adolescence (12-14)
- Late Adolescence (15-18)

## **Key components:**

- School Staff Development
- Family Programs
- Social Skills Training

## **Delivery methods:**

- Strategic consultation
- Technical assistance
- Training and capacity building through a train the trainers approach

## ■ Study: Seattle Social Development Project/Raising Healthy Children

- ✓ Population: Students in grades 1-12
- ✓ Findings:
  - Immediate effects: Strengthened social development in childhood; Improved social and academic skills; Decreased early onset of drug use and delinquency; Improved behavior at school; Greater commitment to school; Increased academic achievement (Catalano et al., 2007; Hawkins et al., 1991)
  - Age 13 – 18: Less growth in frequency of alcohol and marijuana use than controls, less driving under the influence of alcohol and drugs than controls (Brown et al., 2005; Haggerty et al., 2006)
  - Age 18: Students showed significantly less violent delinquency, heavy drinking, sexual activity, school misbehavior than controls
  - Age 21: Fewer lifetime sex partners; Fewer pregnancies and births (among females) (Lonzak et al., 2002)
  - Age 24: More involvement in community groups; Higher college completion; More constructive self-efficacy; More volunteerism (Hawkins et al., 2006)

## ■ Evaluated populations

- Seattle—47% White, 26% Black (stronger STI, teen pregnancy outcomes) 22% Asian, 5% Native American, 5% Hispanic—42% free/reduced lunch
- Raising Healthy Children-Edmonds—82% White



## ■ Target populations—Universal

- Urban (Seattle Social Development Project)
- Suburban (Raising Healthy Children)
- Rural (OAH replications)



## ■ Potential adaptations

### ○ Settings

- When and where parenting programs and staff development sessions are conducted

### ○ Cultural relevance

- Attention to issues related to school suspension and disproportionality

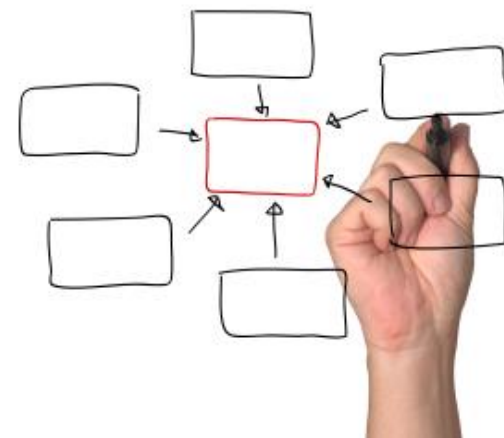
### ○ Language

- Parenting programs have been translated into Spanish

### ○ Other

- Booster trainings for staff and new staff orientation has been developed

**Note: TPP grantees must obtain prior approval from OAH for any adaptations.**



- **Staffing considerations**

- Teaching coach for each school
- Trusted master educator
- Strong Parent Workshop leaders



- **Training considerations**

- Train the trainer model
- Cost depends on number of schools
  - TOT for school staff development (9 days)
  - TOT for parenting programs

## ■ Common challenges

- Transitions of staff, principals, teachers
- Recruiting parents into parenting programs
- Monitoring and evaluating progress



## ■ Strategies for success

- Strong District Support
- Strong Coaching Team
- Train the Trainer model
- Parent recruiters
- Strong implementation fidelity training

- **Recent or planned curriculum revisions**

- Update to include Common Core examples in school staff development
- Update to include new research outcomes
- Provide orientation materials for new staff

- **HHS Teen Pregnancy Prevention Evidence Review**
  - <http://tppevidencereview.aspe.hhs.gov/>
- **Link to implementation report**
  - <http://tppevidencereview.aspe.hhs.gov/document.aspx?rid=3&sid=150&mid=1>
- **Link to distributor's website**
  - <http://www.etr.org/ebi/programs/project-image/>
- **To ask questions**
  - <http://programsupport.etr.org/>

# References

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Thank you!

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